



## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

**Application or Docket Number** 

10/518981

CLAIMS AS FILED - PART I								SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
<b>-</b>				ımn 1)		Column 2)	1			1		
U.S. NATIONAL STAGE FEES								RATE	FEE		RATE	FEE
BAS	IC FEE			NT. = \$ 150		SE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	300
EXA	MINATION FE	E	(4) = \$	Article 33(1)- 50 / \$ 100		her situations = 100 / \$ 200		EXAM. FEE		i i	EXAM, FEE	200
SEA	RCH FEE		ALL other	omer countines =		her situations = 250 / \$ 500		SEARCH FEE			SEARCH FEE	400
FEE	FOR EXTRA S	PEC. PGS.	m	inus 100 =	ius 100 =			X \$ 125 =			X \$ 250 =	
τοτ	AL CHARGEA	BLE CLAIMS	9 '	minus 20 = .				X \$ 25 =		OR	X \$ 50 =	
IND	EPENDENT CL	AIMS	,	, minus 3 = .				X \$ 100 =		OR	X \$ 200 =	
MULTIPLE DEPENDENT CLAIM PRESENT								+ \$ 180 =		OR	+ \$ 360 =	
If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	300
CLAIMS AS AMENDED - PART II										•-	OTHER	
19	21-04	(Column 1)			SMALL E	NTITY	OR	SMALL E	NTITY			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	,	HIGHE NUMBE PREVIOL PAID FI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 9	Minus	- 2	0	= 6		X \$ 25 =		OR	.X \$ 50 =	
	Independent	•	Minus	200	3	<b>-</b> ()		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	X
						•	•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
								1				7
		(Column 1)		(Colur		(Column 3)						
		Claims Remaining After Amendment		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus .	••		3		X \$ 25 =		OR	X \$ 50 = .	
	Independent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
	•				TOTAL ADDIT.		OR	TOTAL ADDIT.				
FEE FEE  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
••	If the "Highest Nu	mber Previously F	aid For IN THIS	SPACE is less	than 20	7, enter "20".						
***	If the "Highest Nu The "Highest Nun	mber Previously F ober Previously Pa	Paid For IN THIS aid For (Total or	SPACE is less Independent) i	s than '3' s the high	, enter "3". hest number found	in th	e appropriate box	in column 1.			